Permit No:	
(DMLR use only)	
Bond Applied To:	
(DMLR use only)	
Bond No:	



VIRGINIA DEPARTMENT OF ENERGY DIVISION OF MINED LAND REPURPOSING $3405\ \mathrm{MOUNTAIN}$ EMPIRE ROAD; BIG STONE GAP, VA $\ 24219$ TELEPHONE: (276) 523-8100

SURETY BOND

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED

(hereafter PRI	NCIPAL),	
whose principal place of business is		
and who does business as a [CHECK ONE ONLY]:	Corporation;	Limited Partnership;
Limited Liability Company; Partnership; or	Sole Proprietorship, actin	ng herein as PRINCIPAL, and
(hereafter SU	(RETY),	
whose principal business address is and who was organized and is existing under the laws of the sand licensed to write and perform surety business in the Com the	State of monwealth of Virginia, are	
COMMONWEALTH DIRECTOR, DIVISION OF MIN (hereafter OB	ED LAND RECLAMAT	TION .
in the sum of		
(\$) Dollars for the payment of whic	h cum the PRINCIPAL at	nd SURFTV bind
themselves, their heirs, executors, administrators, successors, presents.		
THE CONDITION OF THE ABOVE OBLIGA	TION is such that:	
WHEREAS, the PRINCIPAL proposes to comm	ence coal surface mining t	to be known as
in	County(ies) of Vir	ginia; and,

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WHEREAS, the above-named PRINCIPAL has subn	nitted [CHECK ONE ONL	<u>Y</u>]:

WHEREAS, the above-named PI	RINCIPAL has submitted [CH	ECK ONE ONLY]:
Permit Application Number or, reclamation plan, to conduct and reclaim a COAL SURFACE MINING CONTROL attendant regulations; and,	surface coal mining operation,	
WHEREAS, the PRINCIPAL has of the land disturbed during this surface min regulations, and as specified in the permit a	ning operation will be complete	ce bond as a guarantee that the reclamation ed as required by the ACT , its attendant
WHEREAS, the SURETY, and to indemnify, defend, and hold harmless OBL sustain as a result of the PRINCIPAL'S fa	IGEE from any and all losses	
WHEREAS, obligations guarante lands approved as the permit area or increm		hall be in effect for the following described eeding operations will be conducted:
NOW, if the PRINCIPAL faithfu ACT and its Permit issued in reliance on the obligation shall be void; otherwise, it shall issuance of [CHECK ONE ONLY]:	is Surety Bond, including the r	
Permit Application Number or, I	Permit Number	_ pursuant to the ACT and continue until:
(a) the permit has been complete	ed to the satisfaction of the OB	LIGEE, or
(b) the bond is released pursuan	t to the ACT , or	
(a) in the event paither (a) or (b)	ahova annlias for a minimum	period of five (5) years for a general permi

(c) in the event neither (a) or (b) above applies, for a minimum period of five (5) years for a general permit or two (2) years for an approved plan for remining. This shall be the minimum period of extended responsibility unless the bond is replaced in accordance with the **ACT**, or unless the permit has been sold, reassigned, or otherwise transferred in accordance with the **ACT**. It shall be further understood that if the **PRINCIPAL** performs any augmented seeding, fertilization, or other supplemental reclamation work on the site prior to bond release, the period of liability under this bond shall begin again subject to the exception found in the **ACT**

The failure of the **PRINCIPAL** to fulfill the obligations specified by the **ACT** and its permit shall result in a forfeiture of this performance bond according to the procedures described in the **ACT**.

The **SURETY** shall not cancel this bond at any time for any reason, including non-payment of premium or bankruptcy of the **PRINCIPAL** during the period of liability. The amount of the **SURETY'S** liability may be adjusted by the **OBLIGEE** pursuant to the **ACT** for lands covered by this bond.

The **SURETY** shall give prompt notice to the **PRINCIPAL** and to the **OBLIGEE** of any notice received or action filed alleging the insolvency or bankruptcy of the **SURETY** or of the **PRINCIPAL**, or alleging any violations or regulatory requirements which could result in suspension or revocation of the **SURETY'S** license to do business.

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In the event the **SURETY** becomes unable to fulfill its obligations under the bond for any reason, notice shall be given immediately to the **PRINCIPAL** and to the **OBLIGEE**. Any proceeding, legal or equitable, under this bond must be instituted in a Virginia court of competent jurisdiction and shall be governed by the laws of the Commonwealth of Virginia.

Upon the incapacity of the **SURETY** by reason of bankruptcy, insolvency, or suspension or revocation of its license, the **PRINCIPAL** shall be deemed to be without bond coverage in violation of the **ACT** and subject to enforcement actions described in the **ACT**.

I. BY COMPANY/PRINCIPAL:			
Company /Principal	(SEAL) By: _	Company/Principal Official	
Title	_	Date	
Subscribed and sworn/affirmed to before me by			
this day of	20 _	, in the State of	
in the City/County of			
Notone Dublic None (printed on tone		Notary Public Signature ¹	_ (Seal)
Notary Public Name (printed or type	ea)	Notary Public Signature	
My Commission expires		Registration No.	

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¹ Pursuant to §47.1-15(3) of the Code of Virginia, as amended, the notarial certificate wording must be contained on the same page as the signature being notarized.

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II. BY SURETY: Attach copy bearing seal Corporate Officer's auth		
	(SEAL) By:	
Surety Name		Attorney-in-Fact
Date		Attorney-in-Fact Name (printed or typed)
AFFIDAVIT AND ACKNOWLEDGEME COMMONWEALTH OF VIRGINIA	NT OF ATTORNEY-I	N-FACT
(or, alternatively, Commonwealth or State of		
CITY/COUNTY OF	, to v	wit:
I, the undersigned notary public, do certify the	at	
personally appeared before me in the jurisdict	tion aforesaid and made	oath that he/she is the
attorney-in-fact of		
the Surety, that he/she is duly authorized to ex	xecute on its behalf the f	Foregoing Bond pursuant to the attached Power of
Attorney, and on behalf of said Surety acknow	wledged the aforesaid Bo	ond(s) as its act and deed.
Given under my hand this	day of	, 20
		(SEAL)
Notary Public Name (printed or	typed)	Notary Public Signature (SEAL)
My Commission expires:		Registration No.

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III. BY ISSUING AG	 Attach copy of Agency License and Appointment Card from the Virginia Bureau of Insurance. Attach copy of Agent's License and Appointment Card from the Virginia Bureau of Insurance.
Insurance Agency	Issuing Surety Bond (provide the following information):
Agency name:	
Agency address:	
Authorized agent:	
Authorized agent	ddress
Office telephone r	ımber:
IV. DIVISION A	PPROVAL:
ACCEPTED:	Date:
	Division of Mined Land Repurposing